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Telehealth to Digital Medicine: How 21st Century Technology Can Benefit Patients

On Thursday, May 1, 2014, the House Energy & Commerce Committee conducted a hearing to discuss telehealth technologies that hold promises to transform the U.S. healthcare system and explore their positive and negative implications. The witness panel consisted of:

- [Dr. Rashid Bashshur](#), Executive Director for eHealth, University of Michigan Health System, Professor Emeritus, University of Michigan School of Public Health
- [Dr. Ateev Mehrotra](#), Policy Analyst, Rand Corporation, Associate Professor of Health Care Policy and Medicine, Harvard Medical School
- [Dr. Tom Beeman](#), President and Chief Executive Officer, Lancaster General Health
- [Gary Chard](#), Delaware State Director, Parkinson's Action Network
- [Kofi Jones](#), Vice President of Public Affairs, American Well

The hearing began with opening statements from Health Subcommittee [Chairman Joseph Pitts](#) (R-PA) and Energy and Commerce Committee [Chairman Fred Upton](#) (R-MI).

Chairman Pitts expressed both the benefits and concerns on the growing use of telemedicine. Two important improvements telemedicine will bring to the US healthcare system include in-home monitoring of chronically ill patients and providing better patient education. The concerns involve how to support the new technology tools while avoiding waste, fraud, and abuse. The Committee is seeking policy and legislative ideas for how the federal government can support the adoption of telehealth technology and in which ways the federal government currently inhibits the use of such technologies.

Chairman Fred Upton explained that the topic of telemedicine is here to stay and will be a priority of the Energy and Commerce committee over the next few years. Telemedicine will support the healthcare industry with new care and delivery reform models in the quest for reducing healthcare costs. New models such as Accountable Care Organizations (ACOs) and Patient-Centered Medical Homes (PCMHs) have the potential to lower costs and improve the quality of care with telehealth tools. Telehealth will also support the reform models included in the bipartisan Sustainable Growth Rate (SGR) reform legislation.

Background

Telehealth, the use of 21st century technology to deliver a new form of care delivery via digital imagery and virtual patient visits, is increasingly becoming a promise for the US health care system in the near future. The House Energy and Commerce Committee seeks to understand the benefits and challenges of telehealth technology currently being used today to identify ways that such technologies could help the US transform the equality and improve the delivery of health care. The current 113th Congress has produced a number of legislation that focus on expanding the use of telehealth and breaking down barriers. The Health Subcommittee ranking member, Frank Pallone (D-NJ), introduced the TELE-MED Act of 2013 [*H.R. 3077*] to permit certain Medicare providers to provide telemedicine services to

Medicare beneficiaries across states. Congressman Gregg Harper (R-MS) introduced the Telehealth Enhancement Act of 2013 to promote and expand the application of telehealth under Medicare and other Federal health care programs.

Witnesses

Dr. Rashid Bashshur, Executive Director for eHealth at the University of Michigan Health System and Professor Emeritus at University of Michigan School of Public Health, testified before the committee on how telemedicine consultations can save lives, reduce care delivery times, and improve public access to healthcare providers. Dr. Bashshur explained how technologies such as wearable sensors, smartphones will be the dominant forms of telemedicine portals. The current reasons for delay in wider implementation of telemedicine surround issues in reimbursement policy for telemedicine consultations which is limited to certain areas and is currently managed through an ineffective process. Dr. Bashshur also cited the challenge with Electronic Health Records (EHRs) having limited connection to telemedicine.

Dr. Ateev Mehrotra, Policy Analyst at Rand Corporation and Associate Professor of Health Care Policy and Medicine at Harvard Medical School, testified on his research on impact of new care delivery methods such as telemedicine. He shared his four main recommendations to the committee:

- 1) Frame telehealth definition broadly.
- 2) Do not always assume that telehealth will improve care. Studies have found both negative and positive health outcomes due to telehealth.
- 3) Telehealth can improve access for rural areas, but may also be more used more frequently by in urban areas.
- 4) Telehealth can reduce healthcare costs per visit; however, it may not be proof of the total reduction of healthcare costs. Healthcare costs can increase if telehealth increases the utilization of unnecessary provider consultations.

Dr. Tom Beeman, President and Chief Executive Officer at Lancaster General Health, testified before the committee on Lancaster General Health's experience in using telehealth and successfully saving healthcare costs. Lancaster's EHRs are connected to HealthWay, the national health data exchange network, and provides physicians with clinical decision support tools and patient portals. Lancaster's program called "Care Connections" uses their EHR data to identify recurring and vulnerable patients to provide targeted treatment plans for the goal of reducing inpatient stays and ER visits. Lancaster saved more than \$80,000 in one year. Dr. Beeman explained how the foundation of the program is telehealth and empowering the care team with ipads, iphones, and video conferencing tools.

Gary Chard, Delaware State Director at Parkinson's Action Network, testified on his experience receiving telehealth consultations with his Parkinsons treatment. Using telehealth, Mr. Chard explained how he can visit his doctor more frequently and receive timely treatment monitoring data. He advocated for the benefits of telehealth technology and the need to reduce the barriers limiting telehealth.

Kofi Jones, Vice President of Public Affairs at American Well, testified before Congress on the American Well telehealth program. American Well uses telehealth to remove the traditional barriers in providing healthcare and instead provide HIPAA compliant

video conferencing and mobile health application technology to its providers. Ms. Jones emphasized that Congress must help to breakdown the two impeding barriers in expanding telehealth, provider telehealth licensing and reimbursement policy. Licensure is a lengthy and costly procedure for physicians and the reimbursement policy needs to be updated to have complete deployment of telehealth. Ms. Jones noted that telehealth language in the Social Security Act has not been updated since 2000.

Questions and Discussion from the Committee Members

Chairman Pitts (R-PA) asked the panel how the federal government should make sure that telehealth will provide solutions to the problems of the US healthcare system. Dr. Beeman and Dr. Mehrotra responded to have Congress focus on promoting financial responsibility on providers while providing a greater ease of use telehealth technology through bundled payments and the Medicare Shared Savings Program (MSSP).

Ranking Member Pallone (R-MS) asked the panelists on how can telehealth be improved through legislation other than breaking the financial barriers to telehealth. Dr. Mehrotra replied that congress should consider the risks on expanding telehealth. Many patients may not benefit from telehealth consults and some procedures can be more dangerous with expanded access. Within the emerging telehealth legislation, "congress needs to consider how to make sure telehealth is not overused," said Dr. Mehrotra.

Congressmen Bartman (R-TX) asked questions related to the privacy risks of exchanging health information via telehealth. Ms. Jones explained how American Well provides HIPAA compliant telehealth technology and has a secure patient health portal. All telehealth technology needs to have this policy and standard of privacy and security. Ms. Jones emphasized to the committee that Congress needs to discuss and promote infrastructure for a safe and secure environment for physicians to use telehealth.

The subcommittee is [seeking feedback](#) on efforts to expand telehealth access until June 16, 2014. The witness testimonies and a video recording of the hearing are available [here](#).